SEC 1972 (6-02)

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL
OMB Number: 3235-0076
Expires: May 31, 2005
Estimated average burden
hours per response 1

SEC USE ONLY
Prefix Serial
DATE RECEIVED

Filing Under (Check box(es) tha	it apply):	[] <u>Rule 504</u>	[] <u>Rule 505</u>	[X] <u>Rule 506</u>	[] Section 4(6) [] ULOE
Type of Filing: [X] New Filing	[] Amer	ndment			
		A. BASIC IDE	NTIFICATION	DATA	
1. Enter the information request	ed about th	ne issuer			04007658
Name of Issuer [] check if this i	is an amer	ndment and nam	e has changed	l, and indicate c	- •
Qualyst, Inc. Address of Executive Offices: I	P O Box 2	30189 Raleigh	NC 27622		——PROCESSEE
Telephone Number (Including A					Phoopson
					FEB 13 2004
Address of Principal Business C Telephone Number (Including A					THOMSON
(if different from Executive Office	,	Same as above	5		FINANCIAL
·					
Brief Description of Business					
·	<u>cializes in s</u>	creening chemics	al compounds to	assess the suita	bility of compounds for testing
Brief Description of Business Biotechnology company that spec	<u>ializes in s</u>	creening chemics	al compounds to	assess the suita	bility of compounds for testing
Biotechnology company that spec pharmaceutical products.	cializes in s	creening chemics	al compounds to	assess the suita	bility of compounds for testin
Biotechnology company that spec pharmaceutical products. Type of Business Organization					
Biotechnology company that spec pharmaceutical products. Type of Business Organization [X] corporation	[] limite	ed partnership, a	already formed		bility of compounds for testing
Biotechnology company that spec pharmaceutical products. Type of Business Organization	[] limite		already formed		
Biotechnology company that spec pharmaceutical products. Type of Business Organization [X] corporation	[] limite	ed partnership, a	already formed to be formed	[] other	
Biotechnology company that spec pharmaceutical products. Type of Business Organization [X] corporation	[] limite	ed partnership, a ed partnership, t	already formed to be formed Month Ye	[] other	(please specify):

CN for Canada; FN for other foreign jurisdiction)

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	[] Promoter [X] B	eneficial Wner	[X] Executive Officer	[X] Director []	General and/or Managing Partner
Full Name (Last nam Neuville, Scott E.	e first, if individual)				
Business or Residence P.O. Box 30189, Rai					
Check Box(es) that Apply:	[] Promoter [X] E	Beneficial Owner	[] Executive Officer	[X] Director []	General and/or Managing Partner
Full Name (Last nam Thakker, Dhiren R.	e first, if individual)				
Business or Residen P.O. Box 30189, Rai					
Check Box(es) that Apply:	[] Promoter [X]	Beneficial Owner	[] Executive Officer	Director []	General and/or Managing Partner
Full Name (Last nam Brouwer, Kim L. R.	<u> </u>				
Business or Residene P.O. Box 30189, Rai					
Check Box(es) that Apply:	[] Promoter [X]	Beneficial Owner	[] Executive Officer	Director []	General and/or Managing Partner
Full Name (Last nam Pollack, Gary M.	e first, if individual)			. P	
Business or Residene P.O. Box 30189, Rai					
Check Box(es) that Apply:		Beneficial Owner	[] Executive Officer	[] Director []	General and/or Managing Partner
Full Name (Last nam Leonardo Private E	guity Fund, Class			· · · · · · · · · · · · · · · · · · ·	
Business or Residen 34 Jermyn Street, L		, United Kin	gdom		- <u>-</u>

Check Box(es) that Apply:	[] Promoter []	Beneficial Owner	[]	Executive Officer	[X] Director	[] General and/or Managing Partner
Full Name (Last nam Harold S. Lichtin		l)				
Business or Residence		Daladala NO	07040			
3110 Edwards Mill F						
Check Box(es) that Apply:	[] Promoter []	Owner	Ц	Executive Officer	[X] Director	[] General and/or Managing Partner
Full Name (Last nam Ronald Borchardt		<u> </u>				
Business or Residence P.O. Box 30189, Ral		ber and Stre	et, City,	State, Zip Co	de)	
Check Box(es) that Apply:	[] Promoter []	Beneficial Owner	D	Executive Officer	[] Director [] General and/or Managing Partner
Full Name (Last nam	e first, if individua	1)				
Business or Residence	ce Address		<u></u>	-		
Check Box(es) that Apply:	[] Promoter []	Beneficial Owner	0	Executive Officer	Director [] General and/or Managing Partner
Full Name (Last nam	e first, if individua	l)			<u> </u>	
Business or Residence	ce Address		<u></u>			
Check Box(es) that Apply:	[] Promoter []	Beneficial Owner	0	Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last nam	e first, if individua	I)				
Business or Residence	ce Address	· · · · · · · · · · · · · · · · · · ·				
Check Box(es) that Apply:	[] Promoter []	Beneficial Owner	[]	Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last nam	e first, if individua	1)				
Business or Residence	ce Address:		<u>-</u>			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

					B. IN	FORMA	TION A	BOUT OF	FERING					
1. Has	s the issi	uer sold	, or does	s the iss	uer inten	d to sell	, to non-a	accredite	d investo	ors in this	offering	?	Yes	No [X]
				Answe	er also in	Append	ix, Colur	nn 2, if fi	ling unde	r ULOE.				
2. Wh	at is the	minimu.	m invest	tment th	at will be	accepte	ed from a	any indivi	dual?				\$ <u>N/A</u>	_
3. Does the offering permit joint ownership of a single unit?										Yes	No [X]			
4. Entindired of sec register (5)	er the inctly, any urities in the interior in	nformati commis the offe the SE ns to be	on requission or ering. If a	ested fo similar r a persor or with a	er each permuneranto be listed to be listed or contracted permuneranto permuneranto permuneranto permuneranto p	person wation for sted is an states,	tho has solicitation association in the high solicitation in the high s	been or on of pur ated pers ame of ti	will be p chasers on or ag he broke	aid or gi in conne ent of a t r or deal	iven, direction with proker or er. If mor ay set fo	ectly or n sales dealer re than		
Full N	ame (La	st name	first, if i	individua	al)									
Busine	ess or R	esidenc	e Addre	ss (Num	ber and	Street, 0	City, Stat	e, Zip Co	ode)	<u> </u>				
Name	of Asso	ciated E	Broker or	Dealer			· · · · · · · · · · · · · · · · · · ·							
							to Solic	it Purcha	sers					
(Check	t "All Sta	ites" or c	heck indi	ividual S	tates)					-] All State			
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]	[NE]	[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[Ri]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full N	ame (La	ist name	first, if i	individua	al)	<u>_</u>						-,		
Busine	ess or R	esidenc	e Addre	ss (Num	ber and	Street, (City, Stat	e, Zip Co	ode)					
Name	of Asso	ciated E	Broker or	r Dealer			· · · · · · · · · · · · · · · · · · ·	<u> </u>	······································					
States	in Whic	h Perso	n Listed	Has Sc	licited o	rIntends	to Solic	it Purcha	sers			 -		
(Check	c "All Sta	ites" or c	heck ind	ividual S	tates)					[] All State	es		
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[XT]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full N	ame (La	st name	first, if	individua	al)			<u> </u>						
Busine	ess or R	esidenc	e Addre	ss (Num	ber and	Street, 0	City, Stat	e, Zip Co	ode)					
Name	of Asso	ciated E	Broker o	r Dealer						· · · · · · · · · · · · · · · · · · ·			M. C.	
							to Solic	it Purcha	sers					
(Check	c "All Sta	ites" or c	heck ind	ividual S	tates)					[] All State	es		
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]	[NE]	[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Aggregate	Amount Already
Type of Security	Offering Price	Sold
Debt	\$	\$
	\$ <u>1,828,200.00</u>	\$ 611,198.00
[] Common [X] Preferred		
Convertible Securities (including warrants)	\$	\$
Partnership Interests	\$	\$
Other (Specify).	\$	\$
Total	\$ <u>1,828,200.00</u>	\$ <u>611,198.00</u>
Answer also in Appendix, Column 3, if filing under ULOE.		
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
	Number	Aggregate Dollar Amount
	Investors	of Purchases
Accredited Investors	5	\$ 611,198.00
Non-accredited Investors		\$
Total (for filings under Rule 504 only)		\$
Answer also in Appendix, Column 4, if filing under ULOE.		· ·
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
Time of offering	Type of Security	Dollar Amount
Type of offering		Sold ©
Rule 505		\$
Regulation A		\$
Total		\$
		\$
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees	[] \$
Printing and Engraving Costs]] \$
Legal Fees	[X] \$ <u>5,000.00</u>
Accounting Fees]] \$
Engineering Fees]] \$
Sales Commissions (specify finders' fees separately)	[]] \$
Other Expenses (identify) Filing Fees	[]] \$
Total	[X]] \$ <u>5,000.00</u>

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

 b. Enter the difference between the aggregate C - Question 1 and total expenses furnished This difference is the "adjusted gross proceeds" 	in response to Part C - Question 4.a.		\$1,823,200.00
5. Indicate below the amount of the adjusted proposed to be used for each of the purposes not known, furnish an estimate and check the of the payments listed must equal the adjusted in response to Part C - Question 4.b above.	shown. If the amount for any purpose is box to the left of the estimate. The total	; ;	
		Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees			
Purchase of real estate			
Purchase, rental or leasing and installatio			
Construction or leasing of plant buildings			
Acquisition of other businesses (including			
Repayment of indebtedness		7.1	[]\$
Working capital			
Other (specify):			[]\$
, , , , , , , , , , , , , , , , , , , ,			
		[]\$	[]\$
Column Totals		[]\$	[X] \$1,823,200.00
Total Payments Listed (column totals add			323,200.00
	D. FEDERAL SIGNATURE		
The issuer has duly caused this notice to be si Rule 505, the following signature constitutes a Commission, upon written request of its staf pursuant to paragraph (b)(2) of Rule 502.	an undertaking by the issuer to furnish t	o the U.S. Secur	ities and Exchange
Issuer (Print or Type)	Signature	Date	
Qualyst, Inc.	ful 7. /hl	February 3,	2004
Name of Signer (Print or Type)	Title of Signer (Print or Type)		
Scott E. Neuville	President & Chief Executive Office	r	
	Landanian Caracteria C		upper del Tibras (agricultus in Prince in Strand Antoniales successados) alberta
	ATTENTION		
Intentional misstatements or om	issions of fact constitute federal crim U.S.C. 1001.)	ninal violations.	(See 18

E. STATE SIGNATURE			
Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes []	No [X]	
See Appendix, Column 5, for state response			

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature //	Date
Qualyst, Inc.	Stoff . The	February 3, 2004
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Scott E. Neuville	President & Chief Executive Officer	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

	r								
1	2	<u>:</u>	3		4	4		5	
			Type of security					Disquali under Sta	te ULOE
	Intend to non-ac		and aggregate		Type of in	vestor and		(if yes, explana	
	investors	in State	offering price offered in state		amount purch	nased in State		waiver g	ranted)
	(Part B-	Item 1)	(Part C-Item 1)		(Part C	-Item 2)		(Part E-	Item 1)
			Series A-1			Number of			
			Convertible	Number of		Non-			
			Preferred	Accredited	_	Accredited			
State	Yes	No	Stock	Investors	Amount	Investors	Amount	Yes	No
AL							n. d. ander - der in de en	THE RESERVE OF THE PROPERTY OF	
AK AZ									
AR									
CA								:	
СО									
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LA									
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MD									
МА									
МІ									
MN									
MS									
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APPENDIX

1			3						
	2				4	1		Disqual	
			Type of security					under Sta	
	Intend		and aggregate		Tuna af in	vontor and		(if yes,	
	to non-actinvestors		offering price		Type of inv amount purch	vestor and lased in State		waiver of	ation of granted)
	(Part B-		offered in state (Part C-Item 1)		(Part C-	-item 2)		(Part E	item 1)
			Series A						
			Convertible	Number of		Number of Non-			
			Preferred	Accredited		Accredited			
State	Yes	No	Stock	Investors	Amount	Investors	Amount	Yes	No
MT									
NE									
NV									
NH						China Caracan		1	
NJ					[
NM									
NY									
NC		<u> </u>	 						
ND									
ОН		}							
OK									1
OR					THE PROPERTY OF THE PROPERTY O	enderson a constant of the con	a managina a dan basa sa managa a mila sa sa managa		
PA									
RI		<u> </u>							
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WA		<u> </u>							1
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WI						1			
WY									
PR								1	

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